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significant trend change (1.2 per 1,000 enrollees per month,  $p=0.005$ ). SC showed a significant decrease in the trend after the policy (2.1 per 1,000 enrollees per month,  $p=0.013$ ). **Conclusions:** The FL law, one the strictest opioid prescribing laws in the country, was associated with an increase of amphetamine-containing medication use among Medicaid enrollees. Further research is needed to evaluate the effect of opioid policies at the national level.

#### PDG16 EXAMINING THE USE OF SEDATIVE DRUGS IN THE U.S. WORKING POPULATION

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**Objectives:** Sleep disorders remains a persistent public health challenge. The institute of medicine estimates that between 50 to 70 million individuals experience sleep disorders in the U.S. The prevalence of sleep disorders in the U.S. working population is expected to lead to a continuous increase in sedative drug use in this population. This research aims to examine the use of sedatives among the employed, part-time employed, and full time employed participants of the survey. **Methods:** The 2017 National Survey on Drug Use and Health was used. A multivariate regression and propensity score matching was conducted. Treatment-effects estimation with propensity score matching was analyzed individually with the outcome variable for unemployed vs. employed, part-time employed vs. full-time employed, and unemployed vs. part-time employed. Also, the sociodemographic variables were matched for each analysis. **Results:** 31,526 participants aged 18 years and above were analyzed in this study. From the multivariate regression, unemployed and part-time employed participants were .069( $p=0.014$ ) and .027 ( $p=0.000^*$ ) times, respectively less-likely to use sedative drugs as compared to full-time employees. Similarly, the treatment-effects estimation with propensity analysis for sedatives' use found that unemployed participants had 37.4%( $p=0.000^*$ ) less likelihood of using sedatives vs. full-time employed participants. Part-time employed participants had 10.2%( $p=0.012$ ) less likelihood of using sedatives vs. full time employed participants. In comparison, unemployed participants had 31.2%( $p=0.000^*$ ) less likelihood of using sedatives vs. part-time employed. Also, from the sociodemographic analysis, sedative use is found to decrease as income level increases. **Conclusions:** Findings from this study suggest that U.S. employed workers have higher utilization of sedatives. Additionally, we found that the sociodemographic features of an individual may have a moderating effect on the use of sedatives. The insights from this research support the increased need for policies and work-based prevention programs to improve sleep, health status, and productivity of U.S. employees.



results show how real-world data can increase awareness of drugs' safety profile, especially drugs with new therapeutic indications.

#### PDG18 COVERAGE OF THE OPIOID CRISIS IN NATIONAL NETWORK TELEVISION NEWS FROM 2000-2020: A CONTENT ANALYSIS

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**Objectives:** The objective of this study was to describe and analyze national network television news framing of the scope and impact of the opioid crisis in the United States (US). **Methods:** We obtained national network television news segments covering the opioid crisis from January 2000 to August 2020 from the Vanderbilt Television News Archive. The database was queried based on specific keywords: opioid epidemic, oxycontin, heroin, fentanyl, and naloxone. Commercial segments were excluded. We performed a retrospective content analysis in which two independent reviewers quantitatively coded segments for numerous characteristics, including main theme, geographic location, specific opioids mentioned, strategies for combatting the epidemic discussed, interviews conducted, patient demographics, and graphic imagery depicted. Additionally, we analyzed changes in segment characteristics over time (i.e., 2000-2005, 2006-2010, 2011-2015, and 2016-2020) using chi-square analysis. **Results:** Out of 209 segments reviewed, 12 were excluded due to their lack of focus on the opioid crisis and file inaccessibility. Intercooler reliabilities for each characteristic, as assessed by Cohen's Kappa, ranged from 0.7-1. News segments most commonly provided an overview of the opioid epidemic (56%) and/or conveyed personal stories (39%). Prescription opioids (59%) and heroin (63%) were more often referenced than fentanyl (17%). The most frequently interviewed people included OUD patients (46%), healthcare providers (36%), family members/friends (31%), and law enforcement (31%). Coverage of the crisis peaked in 2016. The proportion of news segments that discussed strategies to address the opioid epidemic and fentanyl significantly increased from 2000-2005 (2% and 2%, respectively) to 2016-2020 (13% and 11%, respectively,  $p < 0.05$ ). **Conclusions:** National television networks have frequently utilized personal stories to put a face on the opioid crisis and have increasingly discussed strategies to combat it. Through media coverage, the general population may become more aware and educated about the impact of the crisis in the US.



#### PDG17 ADVERSE DRUG REACTIONS ASSOCIATED TO HYDROXYCHLOROQUINE AND REMDESIVIR IN COVID-19 PATIENTS: ANALYSIS OF REPORTED ADR TO THE PORTUGUESE PHARMACOVIGILANCE SYSTEM

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**Objectives:** To analyse the adverse reactions that occurred with the two main drugs used in the context of the COVID-19 disease - Hydroxychloroquine (1<sup>st</sup> pandemic wave) and Remdesivir (2<sup>nd</sup> pandemic wave) - based on notifications of adverse reactions from Portugal. **Methods:** We conducted a retrospective, observational study on the Portuguese Pharmacovigilance System database, between 03/2020 and 12/2020. We selected Adverse Drug Reactions (ADR) reports that contained Hydroxychloroquine and Remdesivir as suspected drugs and excluded reports that contained more than one drug as suspected of causing ADR. The analyses performed for each drug under study were as follows: (1) seriousness, (2) type of ADR - Preferred Term hierarchy level coding, according to the MedDRA, (3) description of ADR in the SmPC and (4) characteristics of the patient (age and sex). **Results:** Of the 147 ADR reports, 61 (41.5%) are to Hydroxychloroquine, and 87 (58.5%) are to Remdesivir. Regarding the seriousness criteria, there was a percentage of seriousness reports above 80% in both groups. For Hydroxychloroquine, the five most frequent ADRs were: cholestasis (23.2%), hepatocellular injury (14.7%), condition aggravated (8.4%), pancytopenia (4.2%) and QT prolonged electrocardiogram (4.2%). 90% of these ADRs are described in the SmPC. Looking at Remdesivir, the five most frequent ADRs were: increased transaminases (21.7%), renal impairment (9.6%), alanine aminotransferase increased (7.0%), blood creatinine increased (4.35%) and bradycardia (4.35%). Regarding the description of ADRs for this drug in the SmPC, only 38% are described. For both drugs, male patients are the ones who have more ADR (54% for Hydroxychloroquine and 68% for Remdesivir), and the average age is higher in patients taking Hydroxychloroquine (68 years; SD 16 years) than in patients taking Remdesivir (62 years; SD 18 years). **Conclusions:** Our



#### PDG19 PRESCRIPTION OPIOID USE IN WOMEN DURING PREGNANCY - A RETROSPECTIVE ANALYSIS USING TEXAS MEDICAID PRESCRIPTION CLAIMS DATA

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**Objectives:** Consequences of the opioid epidemic in the general population have been widely reported in the peer-reviewed literature. However, few studies have examined the impact of prescription opioid use during pregnancy. The objectives of this study were to determine: a) the overall prescription opioid use prevalence rate during gestation and by trimester; and b) the utilization patterns of prescription opioids among women who were continuously enrolled in Texas Medicaid during gestation. **Methods:** Using data from September 1, 2011 to August 31, 2016, women who were continuously enrolled in Texas Medicaid during gestation with a pregnancy outcome of live birth were identified. Prevalence rates of prescription opioid use during gestation, as well as during each trimester, were then determined. Finally, trends in total number of prescription opioid claims and total days supply across each trimester were determined by two separate repeated measures ANOVA models. **Results:** Of the 315,003 women meeting inclusion criteria, 46,292 had at least one prescription opioid claim during gestation, yielding an overall prescription opioid use prevalence rate of 14.7% during gestation. Prevalence rates during trimesters one, two, and three were 4.0%, 7.1%, and 7.2%, respectively. Repeated measures ANOVA models revealed that the mean number of prescription opioid claims per person and the mean total days supply per person varied significantly ( $P<0.0001$  for both) across all three trimesters, with the highest utilization in the third trimester and the lowest in the first. **Conclusions:** The overall prescription opioid use prevalence rate during gestation, as well as prevalence rates per trimester, were lower than prior reports based on data between 2000 and 2010. Additionally, mean total prescription claims and mean total days supply significantly increased with every passing trimester. Results from this study call for particular attention to prescribing patterns in the third trimester of gestation given opioid related risks.

